

An evaluation of two drugs for treating a familial form of pulmonary arterial hypertension

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Registration date 22/09/2023	Overall study status Ongoing	<input checked="" type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 14/07/2025	Condition category Respiratory	<input type="checkbox"/> Individual participant data <input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Pulmonary arterial hypertension (PAH) is a progressive respiratory condition that causes high blood pressure in the blood vessels that supply blood to the lungs. Current treatments help to manage the symptoms of the disease but do not treat the underlying cause. The condition can occur in families due to an alteration in a gene (a piece of inherited material) called the bone morphogenetic protein type 2 receptor (BMPR2). Currently, there are no therapies that target BMPR2 dysfunction. In a previous study, the study team identified a set of proteins or biological markers (biomarkers) in the blood that regulate BMPR2. In this study, the study team will be using two repurposed drug therapies, hydroxychloroquine and glycerol phenylbutyrate, both of which can change the way BMPR2 is expressed to see if changing the function of BMPR2 is a potential therapy area in PAH.

Who can participate?

Patients aged between 18-75 years old with PAH

What does the study involve?

Participants will be randomised to either active treatment arms:

(T1 = standard of care + hydroxychloroquine; T2 = standard of care + phenylbutyrate)

or control group either:

(C = standard of care + liquid or tablet placebo).

What are the possible benefits and risks of participating?

It is not known whether you will gain any personal benefit from this research. However, information from this study could improve our understanding of the treatment of PAH and help doctors treat patients better in the future.

There are possible risks associated with the following:

ECG

The electrodes (small sticky sensors) may cause slight discomfort when being taken off the skin. Male participants may need to have small patches of hair on the chest shaved to properly

connect the electrodes. Some participants may be sensitive to the adhesive pads resulting in itchy red areas where the patches were placed. These will be performed by an experienced member of staff.

Blood sampling

Minor discomfort, light-headedness or irritation, such as redness, tenderness and bruising at the site used to obtain blood. These will be drawn by an experienced member of the research team.

Trial medication

Both drug treatments (hydroxychloroquine and glycerol phenylbutyrate) used in this trial, are prescribed in the UK for licensed indications and are well tolerated. The doses used in this trial are normal treatment doses prescribed and the drug will be prescribed according to BMI. However, individual participants may react differently to the same drug which means that there is a possibility of experiencing some of the side effects of the drug. Details of drug treatment and side effects are provided in the participant information sheet so participants are fully informed. The trial doctor will monitor any side effects regularly and participants will be encouraged to contact sites if they experience any AEs and take appropriate actions where necessary, by ensuring that all SAEs are assessed for relatedness and expectedness and onward notification of all SARs to the Chief Investigator and Sponsor immediately but not more than 24 hours of first notification.

Where is the study run from?

Royal Papworth NHS Foundation (UK)

When is the study starting and how long is it expected to run for?

January 2020 to February 2027

Who is funding the study?

Medical Research Council (MRC)

Who is the main contact?

1. Dr Mark Toshner (CI), mrt34@medschl.cam.ac.uk
2. Ellen Temple (StratosPHere Trial Manager), ellen.temple4@nhs.net

Contact information

Type(s)

Scientific

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Principal investigator

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Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

1003631

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

Study information

Scientific Title

StratosPHere 2: A response-adaptive randomised placebo-controlled phase IIa trial to evaluate hydroxychloroquine and phenylbutyrate in pulmonary arterial hypertension caused by mutations in BMPR2

Acronym

StratosPHere 2

Study objectives

Pulmonary arterial hypertension (PAH) is a condition in which a narrowing of the blood vessels carrying blood through the lungs puts increased pressure on the heart resulting in it having to work harder to pump blood through the lungs. While current treatments relieve some of the symptoms, they do not stop or reverse the disease in the affected blood vessels. When the disease occurs in families it can be due to an alteration in a gene (a piece of inherited material) called the bone morphogenetic protein type 2 receptor (BMPR2).

The purpose of this study is to improve our understanding of increasing BMPR2 as a treatment for people with PAH by testing two drug therapies; hydroxychloroquine and glycerol phenylbutyrate. We know there are different types of BMPR2 and we want to investigate how these different drug work. In a recent trial, the study team identified biological markers 'biomarkers' in the blood that regulate BMPR2 and we aim to use these as potential targets for both of these drug therapies.

Evaluating the effectiveness of the two drug therapies in a sample of people with a BMPR2 mutation by measuring patient-related outcomes and function specific to this group.

Ethics approval required

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Ethics approval(s)

approved 12/09/2023, London - Surrey Borders Research Ethics Committee (Equinox House, City Link, Nottingham, NG2 4LA, United Kingdom; +44 (0)207 104 8057, (0)207 104 8104, (0)207 104 8199; surreyborder.rec@hra.nhs.uk), ref: 23/LO/0285

Study design

Double-blind three-armed response-adaptive randomized controlled study

Primary study design

Interventional

Study type(s)

Safety, Efficacy

Health condition(s) or problem(s) studied

Pulmonary arterial hypertension

Interventions

StratosPHere 2 is a double-blind, three-armed response-adaptive randomised controlled trial of two active arms (T1 = standard of care + hydroxychloroquine; T2 = standard of care + phenylbutyrate) and a control group (C = standard of care + placebo). The adaptation will be performed based on a Bayesian response-adaptive strategy, designed to dynamically allocate more patients in each subgroup to a promising arm if it is showing an earlier positive effect, making efficient use of a small population and giving patients a higher chance of being allocated to the current most efficacious arm of the trial.

Intervention Type

Drug

Phase

Phase II

Drug/device/biological/vaccine name(s)

Hydroxychloroquine, glycerol phenylbutyrate

Primary outcome(s)

Target engagement of the BMPR2 pathway determined by change in peripheral blood-based BMPR2 function is measured by changes in the expression of a panel of eight BMPR2-modulated genes (i.e., ID3, SMAD1, SMAD5, NOTCH1, NOTCH2, ID2, ARL4C, PTGS2) using quantitative PCR from baseline (study entry/randomisation) to 8 weeks follow-up (8 weeks from treatment initiation)

Key secondary outcome(s)

BMPR2 cell surface protein expression on peripheral blood white cells, measured using flow cytometry at baseline and 8, 16 and 20 weeks

Completion date

01/02/2027

Eligibility

Key inclusion criteria

Subjects eligible for enrolment in the study must meet all of the following criteria:

1. Aged between 18-75 years inclusive
2. Weight >40.0 kg at the Screening Visit
3. Having a diagnosis of group 1 PAH due to the following: Idiopathic or Heritable PAH with a known mutation in BMPR2
4. Being stable on an unchanged PAH therapeutic regime for at least 1 month prior to screening
5. Being competent to understand the information given in the approved Informed Consent Form and must sign the form prior to the initiation of any study procedures

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Mixed

Lower age limit

18 years

Upper age limit

75 years

Sex

All

Key exclusion criteria

PAH treatments:

1. Patients on TNF antagonists or other biological treatments
2. Subject has a known hypersensitivity to the Investigational Products, metabolites, or formulation excipients
3. Subject has a severe renal impairment (creatinine clearance <30 mL/min) at the Screening Visit
4. Subject is currently on either the active treatment arm or trial medication drug class

Medical history/current medical conditions:

1. Subject with an active infection at the time of screening
2. Subjects with known Hepatitis B or Tuberculosis
3. Subject has a severe hepatic impairment (Child-Pugh class C with or without cirrhosis) at the screening Visit
4. Patient with ALT or AST >5 x upper limit of normal

Haematology and bleeding disorders:

1. Subject has clinically significant anaemia in the opinion of the investigator, in particular from pyruvate kinase and G6PD deficiencies
2. Subjects with bleeding disorders or significant active peptic ulceration in the opinion of the investigator
3. Subject has peripheral blood platelets $<100 \times 10^9/L$
4. Subject has a neutrophil count $<2 \times 10^9/L$

Cardiovascular:

1. Subject has had an acute myocardial infarction within the last 90 days prior to screening

General medical conditions:

1. Subject with cardiovascular, liver, renal, haematologic, gastrointestinal, immunologic, endocrine, metabolic, or central nervous system disease that, in the opinion of the Investigator, may adversely affect the safety of the subject and/or efficacy of the investigational product or severely limit the lifespan of the subject other than the condition being studied
2. Subject has a history of malignancies within the past 5 years, except for a subject with localized, non-metastatic basal cell carcinoma of the skin, in situ carcinoma of the cervix, or prostate cancer who is not currently or expected, during the study, to undergo radiation therapy, chemotherapy, and/or surgical intervention, or to initiate hormonal treatment
3. History of known retinal disease
4. Currently taking any of the following contraindicated medications:
 - 4.1. Chloroquine
 - 4.2. Halofantrine

- 4.3. Amiodarone
- 4.4. Moxifloxacin
- 4.5. Cyclosporin
- 4.6. Mefloquine
- 4.7. Praziquantel
- 4.8. Prochlorperazine
- 4.9. Fluconazole
- 4.10. Penicillamine
- 4.11. Ivabridine

General Criteria:

1. Female subject who is pregnant or breastfeeding
2. Subject has demonstrated noncompliance with previous medical regimens
3. Subject has a recent (within 1 year) history of abusing alcohol or illicit drugs
4. Subject has participated in a clinical study involving another investigational drug or device within 4 weeks before the Screening Visit

Date of first enrolment

11/12/2023

Date of final enrolment

01/11/2026

Locations

Countries of recruitment

United Kingdom

England

Scotland

Study participating centre

Royal Papworth Hospital

Papworth Road
Cambridge Biomedical Campus
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Study participating centre

Golden Jubilee National Hospital

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Study participating centre

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Sponsor information

Organisation

Papworth Hospital NHS Foundation Trust

ROR

<https://ror.org/01qbebb31>

Funder(s)

Funder type

Research council

Funder Name

Medical Research Council

Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Individual participant data (IPD) sharing plan

The data-sharing plans for the current study are unknown and will be made available at a later date

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article	Participant information sheet	15/10/2024	17/10/2024	Yes	No
Participant information sheet		11/11/2025	11/11/2025	No	Yes
Statistical Analysis Plan		11/07/2025	14/07/2025	No	No